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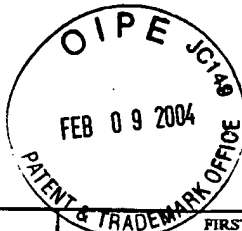
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HORIZON IP PTE LTD
166 KALLANG WAY
SINGAPORE 349249
SINGAPORE, 349249
SINGAPORE



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Andea WON	(Depositor's name)
<i>[Signature]</i>	(Signature)
FEB 09, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/065,123	09/19/2002	Michael Jacob	2002P03020US	9766

TITLE OF INVENTION: MEMORY ARCHITECTURE WITH MEMORY CELL GROUPS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	02/09/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUYNH, ANDY	2818	257-295000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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1. Horizon IP Pte Ltd

2.

3.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Infineon Technologies Aktiengesellschaft

St. Martin Strasse 53, D-81699 Munich Germany

Kabushiki Kaisha Toshiba

1-1 Shibaura 1-chome, Minato-ku, Tokyo, 105-8001, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

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☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

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(Authorized Signature)

(Date)

Dexter CHIN (Reg. No. 38,842)

2/9/04

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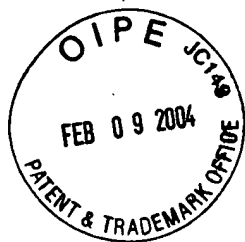
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Signed:

Andrea WON**Facsimile Transmission Cover Sheet**

Recipient : Mail Stop **ISSUE FEE**
Fax : +1 (703) 746 4000

Sender : Dexter CHIN
Horizon IP Pte Ltd
Office : +65 9836 9908

Subject Matter : US Patent Application Number: 10/065,123
Payment of Issue and Publication Fees

Total Pages
(including cover sheet) : 5 pages

Attachments : a) Certificate of Transmission
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PTO/SB/97 (08-03)
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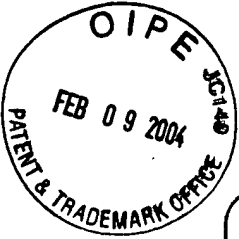
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/065,123	
	Filing Date	Sep. 19, 2002	
	First Named Inventor	Michael JACOB	
	Art Unit	2818	
	Examiner Name	Andy HUYNH	
Total Number of Pages in This Submission	5	Attorney Docket Number	2002P03020US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Dexter CHIN (Reg. No.: 38,842)	
Signature		
Date	2/9/04	

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Typed or printed name	Andrea WON		
Signature		Date	FEB 09, 2004

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